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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/553,603			ing Date 29/2 00 6	To be Mailed	
APPLICATION AS FILED - PART I										ОТ	HER THAN	
L	(Column 1) (Column 2)						SMALL ENTITY			SMA	ALL ENTITY	
FOR NUMBER F			UMBER FI	.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)	1	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A]	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),	E or (q))	N/A		N/A		N/A			N/A		
TO (37	TAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x s =		
	EPENDENT CLAIN CFR 1.16(h))	IS	minus 3 = *			1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawings exceed sheets of paper, the application size fee is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. \$35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))]			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR											ER THAN ALL ENTITY	
AMENDMENT	09/10/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	* 35	Minus	 32	= 3]	x \$ =		OR	X \$52=	156	
	Independent (37 CFR 1.16(h))	• 2	Minus	 3	= 0]	x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	156	
		(Column 1)		(Column 2)	(Column 3)				•			
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,16(i))		Minus	*	-]	x \$ =		OR	x s =		
Ω	Independent (37 CFR 1.16(h))	*	Minus	***		1	x \$ =		OR	x s =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))					1			1			
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))]			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 1	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter" 3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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